**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  
FY 2005**

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)  
55591(71699)

Application Number 09/863,803-Conf. #8907

Filed May 22, 2001

For GENETIC ENGINEERING OF AUTOLOGOUS VEIN GRAFTS

Art Unit 1632

Examiner Q. J. Li

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

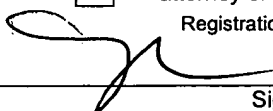
|  | <u>Fee</u> | <u>Small Entity Fee</u> |           |
|--|------------|-------------------------|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))             | \$120      | \$60                    | \$        |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450      | \$225                   | \$ 225.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))          | \$1020     | \$510                   | \$        |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))           | \$1590     | \$795                   | \$        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))           | \$2160     | \$1080                  | \$        |

☒ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed. 08/11/2005 EAYALEW1 00000029 041105 09863803☐ Payment by credit card. Form PTO-2038 is attached. 01 FC:2252 225.00 DA☐ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1105. I have enclosed a duplicate copy of this sheet.I am the ☐ applicant/inventor.☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record. Registration Number \_\_\_\_\_☒ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34 40,927

  
\_\_\_\_\_  
Signature

August 8, 2005

Date

Robert L. Buchanan

Typed or printed name

(617) 439-4444

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV654383976US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: August 8, 2005

Signature:  (Patricia Barnes)